MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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**ADVISORY - Important Information **

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TO: All HAN Recipients

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SUBJECT: Maine Update and New School Closure Guidelines

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Maine Update and New School Closure Guidelines May 5, 2009

Based on revised guidance on school closings from the U.S. Centers for Disease Control and Prevention and in consultation with the Maine Center for Disease Control, Maine Education Commissioner Susan Gendron advised Kennebunk Elementary School to reopen on Wednesday, a day earlier than previously recommended.

In the new guidelines issued Tuesday afternoon, the U.S. CDC no longer recommends that schools with probable cases of H1N1 influenza be closed. Instead, it recommends a focus on "keeping all student, faculty and staff with symptoms of influenza out of schools and childcare facilities during their period of illness and recuperation, when they are potentially infectious to others." The Kennebunk Elementary School was closed starting last Thursday for an expected seven days after a student was found to have a probable case of H1N1.

The Maine CDC continues to test possible cases of H1N1. No new cases were identified on Monday or Tuesday. Totals as of Tuesday, May 5 include: two adults in Kennebec County, three adults and one youth in York County, and one youth in Penobscot County. U.S. CDC has confirmed one of the adults in York County as testing positive for H1N1. All are recovering. Four of the cases had an out of state travel history, though no travel to Mexico. One was a contact of the original four. The epidemiological investigation continues for the other two.

Basic Resources

Because recommendations from U.S. CDC are being updated very frequently, we strongly urge clinicians, school officials, and others to review the most updated guidance before making clinical or closure decisions. We will not be issuing a health advisory for every update. There are several resources for this and related information:

- The U.S. CDC's website can be found at: http://www.cdc.gov/h1n1/
- Maine CDC's website has Maine-specific information, including daily updates, as well as links to federal information. It is located at: http://www.maine.gov/dhhs/boh/swine-flu-2009.shtml or found on the Maine CDC's homepage: www.mainepublichealth.gov
- Maine Department of Education's website has resources and information for schools. It can be found at: http://www.maine.gov/education/h1n1/index.html
- Health care providers or school officials needing updated clinical guidance should call Maine CDC's 24-hour clinical consultation line (1-800-821-5821). This is also the resource to report a suspected case and obtain testing information including expediting the transportation of samples for testing. Maine CDC's Health and Environmental Testing Laboratory (HETL) will perform influenza RT-PCR tests and subtyping for influenza A positive specimens. Instructions on collecting and submitting laboratory diagnostic specimens for H1N1 influenza testing are available at http://www.maine.gov/dhhs/etl/micro/submitting samples.htm.
- The public information line with questions about H1N1 may also call our information support line at 1-888-257-0990 from 9am to 5pm.

Overall Strategies

The overall goal of Maine's efforts to address H1N1 is to minimize its impact in our state. Community mitigation strategies, isolation of people with symptoms such as a fever, isolation of appropriate household contacts, and canceling of events are implemented to slow the spread of the disease in a community in order to: 1. delay the peak of the disease in order to "buy time" for the production and distribution of a vaccine against this new virus; 2. decrease the number of people who get sick from this

virus in a given community, thus reducing the "surge" on healthcare systems; and 3. reduce the total number of people who get sick or die.

The most important strategies to minimize H1N1's impact in Maine are those of **vigilant respiratory etiquette or hygiene**: covering coughs and sneezes with sleeves or a tissue; washing hands frequently; and staying home if ill, especially with a fever.

Additionally, everyone should **stay informed** since this event is rapidly changing and so is the resulting guidance

Importantly, everyone should also **make preparations**. These preparations include activating a pandemic influenza plan. Every hospital, other health care institution, emergency management agency, school business, agency or organization should activate their pandemic influenza plan. Every individual and family should also activate their plan. If one does not exist, then preparation check lists for a variety of settings including individuals, homes, businesses, and schools can be found at: http://www.pandemicflu.gov/plan/checklists.html. These plans generally call for such measures as ensuring adequate critical supplies are on hand and preparing for higher than normal absenteeism. Because H1N1 is now found to be circulating in various parts of the globe and because the number of identified cases is only an indication of the presence of H1N1 in a geographical area and not the total number of cases, we must be prepared to see H1N1 circulating and re-appearing for weeks and months to come.

For Communities and Areas Where H1NH Has Been Identified

The previously published United States government guidance on community mitigation (http://www.pandemicflu.gov/plan/community/commitigation.html) relies on knowledge of the Pandemic Severity Index (PSI) to characterize the severity of a pandemic and identify the recommendations for specific interventions that communities may use for a given level of severity, and suggests when these measures should be started and how long they should be used. The substantial difference in the severity of the illness associated with infections from the same virus, the relatively low number of cases detected in the United States, and insufficient epidemiologic and clinical data to ascribe a PSI, present a formidable challenge in terms of assessing the threat posed by this novel influenza A virus until additional epidemiologic and virology information is learned.

Update on School (K – 12) and Childcare Facilities: Interim CDC Guidance in Response to Human Infections with the Novel Influenza A (H1N1) Virus

Background

This document provides updated interim guidance for schools and childcare facilities regarding the prevention of the spread of novel influenza A (H1N1) virus.

Initial cases of novel influenza A (H1N1) in the United States included school-aged students and were associated with travel to Mexico and school-based outbreaks. Early information from Mexico indicated that many previously healthy young adults were hospitalized with rapidly progressive pneumonia, frequently resulting in respiratory failure requiring mechanical ventilation and death.

Based on this initial information, CDC recommended consideration of school closure as an option to lessen the risk of infection with this novel influenza virus in order to protect students, staff, parents and other caregivers from a potentially severe disease as well as limit spread into the community.

New information on disease severity warrant revision of the school closure guidance. Most U.S. cases have not been severe and are comparable in severity to seasonal influenza. CDC and local and state health officials will continue to closely monitor the severity and spread of this novel H1N1 influenza outbreak.

At this time, CDC recommends the primary means to reduce spread of influenza in schools focus on early identification of ill students and staff, staying home when ill, and good cough and hand hygiene etiquette. Decisions about school closure should be at the discretion of local authorities based on local considerations, including public concern and the impact of school absenteeism and staffing shortages.

Recommendations

- School closure is not advised for a suspected or confirmed case of novel influenza A (H1N1) and, in general, is not advised unless there is a magnitude of faculty or student absenteeism that interferes with the school's ability to function.
- Schools that were closed based on previous interim CDC guidance related to this outbreak may reopen.
- Students, faculty or staff with influenza-like illness (fever with a cough or sore throat) should stay home and not attend school or go into the community except to seek medical care for at least 7 days even if symptoms resolve sooner.
- Students, faculty and staff who are still sick 7 days after they become ill should continue to stay home from school until at least 24 hours after symptoms have resolved.
- Students, faculty and staff who appear to have an influenza-like illness at arrival or become ill during the school day should be isolated promptly in a room separate from other students and sent home.
- Parents and guardians should monitor their school-aged children, and faculty and staff should self-monitor every morning for symptoms of influenza-like illness.
- Ill students should not attend alternative child care or congregate in settings other than school.
- School administrators should communicate regularly with local public health officials to obtain guidance about reporting of influenza-like illnesses in the school.
- Schools can help serve as a focus for educational activities aimed at promoting ways to reduce the spread of influenza, including hand hygiene and cough etiquette.
- Students, faculty and staff should stringently follow sanitary measures to reduce the spread of influenza, including covering their nose and mouth with a tissue when coughing or sneezing (or coughing or sneezing into their sleeve if a tissue isn't available), frequently washing hands with soap and water, or using hand sanitizer if hand washing with soap and water is not possible.

Further guidance can be found in:

Questions and Answers About Novel H1N1 Flu at http://www.cdc.gov/h1n1flu/qa.htm

What to Do If You Get Flu-Like Symptoms at http://www.cdc.gov/h1n1flu/sick.htm

Interim Guidance for H1N1 Flu: Taking Care of a Sick Person in Your Home at http://www.cdc.gov/h1n1flu/guidance homecare.htm